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CONFIRMATION NO. 4608

<b>SERIAL NUMBER</b> 10/528,697	<b>FILING OR 371(c) DATE</b> 09/29/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 268118US0PCT
<b>APPLICANTS</b> Andreas Habich, Speyer, GERMANY; Morten M Hansen, Allerød, DENMARK; Carsten L Hansen, Herlev, DENMARK; Brigitte Yde, Farum, DENMARK; Alfred Oftring, Bad Duerkheim, GERMANY; Michael Schoenherr, Frankenthal, GERMANY; Felicitas Guth, Mannheim, GERMANY; Oliver Hasselwander, Landau, GERMANY;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP03/10535 09/22/2003				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 102 44 397.1 09/24/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 25
Verified and Acknowledged _____ Examiner's Signature Initials				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 22850				
<b>TITLE</b> Choline ascorbate formulations				
<b>FILING FEE RECEIVED</b> 1740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	